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Heart Failure and Cardiomyopathies

SAFETY AND OUTCOMES OF INDUCTION IMMUNOSUPPRESSION FOR CARDIAC TRANSPLANTATION IN PATIENTS WITH ACTIVE DRIVELINE INFECTION

Poster Contributions
Hall C
Sunday, March 30, 2014, 9:45 a.m.-10:30 a.m.

Session Title: Heart Failure and Cardiomyopathies: Therapy III
Abstract Category: 14. Heart Failure and Cardiomyopathies: Therapy
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Background: There is a paucity of data on the use of induction immunosuppression in patients with active infections undergoing orthotopic heart transplantation (OHT). We hypothesized that induction immunosuppression in patients with ventricular assist device (VAD) undergoing OHT with localized active driveline infection (DLI) does not lead to worse outcomes.

Methods: We retrospectively analyzed our database for bridge-to-transplant VAD patients who underwent OHT. Patients were stratified into those with and without active DLI at the time of OHT and followed till death or at least 30 months after OHT. Post-transplant length of stay (LOS), mortality and development of infectious complications were compared between the two groups.

Results: 38 patients (30 males) with mean age of 57.5 years with VAD underwent OHT during the study period. 12 had active DLI and 26 did not have DLI. Mean follow up was 46.4 ± 23.1 months. There was no difference in the post-transplant LOS, type of induction agent used, post-operative renal function or mortality between the two groups. There was no significant difference in development of any infection either in the first month or during entire follow up between the two groups (Table). None of the patients in the DLI group had infections attributable to the same organism responsible for pre-transplant DLI.

Conclusion: In patients with active DLI, induction immunosuppression after OHT did not increase post-transplant LOS, infections or mortality after at least 30 months of follow up.

Characteristics of patients with and without driveline infections who had heart transplantation

Variable	Patients without driveline infection at the time of OHT (N= 26)	Patients with active driveline infection at the time of OHT (N=12)	P value
Mean age (years)	60 ± 13.2	52.03 ± 12.4	NS
Male gender	21 (81%)	9 (75%)	NS
Caucasian race	22 (84%)	8 (66%)	NS
Body Mass Index (kg/m2)	27 ± 3.4	29.6 ± 10.8	NS
Duration of LVAD support prior to transplantation (days)	220 ± 192.3	389.2 ± 180	0.02
Post Transplant Length of Stay (days)	17.2 ± 13.7	16.3 ± 5.4	NS
Development of infectious complication in first month post transplant	6 (23%)	3 (25%)	NS
Development of any infection during follow up	23 (89%)	11 (92%)	NS
Number of deaths	6 (23%)	2 (17%)	NS